

Attorney Docket No. 301-415 *B/29*

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Harry M. O'Sullivan

Serial No : 09/835,464

Filed : April 17, 2001

For : CELLULAR TELEPHONE DATA
COMMUNICATION SYSTEM AND
METHOD

Examiner:
Lele, T.

Group Art Unit:
2684

Transmittal Letter

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Attached is a Declaration as requested by Ex. Lele.

Respectfully submitted,

Date:

October 22, 2004

Charles M. Leedom, Jr.

Charles M. Leedom, Jr.

Registration No. 26,477

Telephone: (703) 241-0165 Cell (703) 975 2082

Fax: (703) 241-5733

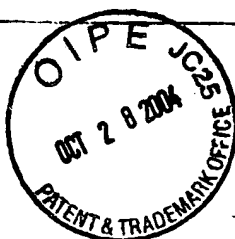
Email: cleedom@mlr-llc.com

MLR, LLC

6524 Truman Lane

Falls Church, VA

CML/cml



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

301-415

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 4,697,281 granted September 29, 1987 and for which a reissue patent is sought on the invention entitled _____

Cellular Telephone Data Communication System and Method

the specification of which

☐ is attached hereto.

☒ was ~~filed~~ on April 17, 2001 as reissue application number 09/835,464

and was amended on July 24, 2002; November 15, 2002; August 20, 2003;
(If applicable) December 16, 2003 and June 9, 2004

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

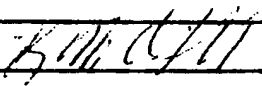
This is a broadening reissue. Original claim 1 of Patent No. 4,697,281 included the phrase "activated state" in reference to the method of operating a modem. This phrase was included by error and was unnecessary to the invention now being claimed in this divisional reissue and rendered the original patent wholly or partly inoperative.

[Page 1 of 2]

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)						Docket Number (Optional) 301-415	
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.							
Note: To appoint a power of attorney, use form PTO/SB/81.							
Correspondence Address: Direct all communications about the application to:							
<input type="checkbox"/> Customer Number:							
OR							
<input checked="" type="checkbox"/> Firm or Individual Name	Charles M. Leedom Jr.						
Address	6524 Truman Lane						
Address							
City	Falls Church	State	VA	Zip	22043		
Country	USA						
Telephone	703 241 0165		Fax	703 241 5733			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, and that I am not using thereon, or any patent to which this declaration is directed.							
Full name of sole or first inventor (given name, family name)							
				Harry M. O'Sullivan			
Inventor's signature				Date	12/26/04		
Residence	West Covina, CA			Citizenship	USA		
Mailing Address							
219 South Manzanita Dr, West Covina, CA 91791							
Full name of second joint inventor (given name, family name)							
Inventor's signature				Date			
Residence				Citizenship			
Mailing Address							
Full name of third joint inventor (given name, family name)							
Inventor's signature				Date			
Residence				Citizenship			
Mailing Address							
<input type="checkbox"/> Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.							

[Page 2 of 2]

BEST AVAILABLE COPY